

# ILLINOIS DEPARTMENT OF INSURANCE

## SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 05/01/11 ~~+2.7%~~

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers compensation</u> Line of Insurance	2,642,852	+2.7%

Does filing only apply to certain territory (territories) or certain classes? If so, specify: This filing applies to all classes, although the resulting impact is not uniform by class.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Adopt NCCI loss costs referenced in approval circular IL-2010-10.

\*Adjusted to reflect all prior rate changes.

\*\*Change in Company's premium level which will result from application of new rates.

Accident Fund General Insurance Company  
Name of Company

Judy Thomas, Compliance Advisor  
Official - Title

# FILED

MAY 01 2011

STATE OF ILLINOIS  
DEPARTMENT OF INSURANCE  
SPRINGFIELD, ILLINOIS

# ILLINOIS DEPARTMENT OF INSURANCE

## SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 05/01/11 ~~+2.3%~~

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers compensation</u> Line of Insurance	47,995,663	+2.3%

Does filing only apply to certain territory (territories) or certain classes? If so, specify: This filing applies to all classes,  
although the resulting impact is not uniform by class.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Adopt NCCI loss costs  
referenced in approval circular IL-2010-10.

\*Adjusted to reflect all prior rate changes.

\*\*Change in Company's premium level which will result from application of new rates.

Accident Fund Insurance Company of America  
Name of Company

Judy Thomas, Compliance Advisor  
Official - Title

# FILED

MAY 01 2011

STATE OF ILLINOIS  
DEPARTMENT OF INSURANCE  
SPRINGFIELD, ILLINOIS

# ILLINOIS DEPARTMENT OF INSURANCE

## SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 05/01/11 ~~12.7%~~

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private		
Passenger Commercial		
2. Automobile Physical Damage		
Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers compensation</u>	8,505,233	+2.7%
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: This filing applies to all classes, although the resulting impact is not uniform by class.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Adopt NCCI loss costs referenced in approval circular IL-2010-10.

\*Adjusted to reflect all prior rate changes.

\*\*Change in Company's premium level which will result from application of new rates.

Accident Fund National Insurance Company

Name of Company

Judy Thomas, Compliance Advisor

Official – Title

# FILED

MAY 01 2011

STATE OF ILLINOIS  
DEPARTMENT OF INSURANCE  
SPRINGFIELD, ILLINOIS

# ILLINOIS DEPARTMENT OF INSURANCE

## SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 4/1/2011

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private		
Passenger Commercial		
2. Automobile Physical Damage		
Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers Compensation</u>	\$4,761,328	+0.4%
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: This filing adopts the newest edition of NCCI loss costs. They are not specific to territory. Updated NCCI loss costs will be adopted for all class codes.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): This filing adopts the newest edition of NCCI loss costs. Please see filing memo for more details.

\*Adjusted to reflect all prior rate changes.

\*\*Change in Company's premium level which will result from application of new rates.

Accident Insurance Company

Name of Company

Eric Smith, Chief Underwriting Officer

Official – Title

# FILED

APR 01 2011

STATE OF ILLINOIS  
DEPARTMENT OF INSURANCE  
SPRINGFIELD, ILLINOIS

**FILED**

**MAY 01 2011**

**STATE OF ILLINOIS  
DEPARTMENT OF INSURANCE  
SPRINGFIELD, ILLINOIS**

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by  
revision effective 05/01/11

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers Compensation</u>	<u>\$255,307</u>	<u>-8.2%</u>
<u>Line of Insurance</u>		

Does filing only apply to certain territory (territories) or certain classes?  
If so, specify: No.

Brief description of filing. (If filing follows rates of an advisory  
organization, specify organization): \_\_\_\_\_

Adopting NCCI rates as found in NCCI Circular IL-2010-10.

- \* Adjusted to reflect all prior rate changes.  
\*\* Change in Company's premium level which will  
result from application of new rates.

Allmerica Financial Benefit Insurance Company  
Name of Company

Mandi Al-Beik - Associate State Filings Analyst  
Official - Title

# ILLINOIS DEPARTMENT OF INSURANCE

## SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective May 1, 2011

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers Compensation</u> Line of Insurance	7,268,468	+1.3%

Does filing only apply to certain territory (territories) or certain classes? If so, specify: no

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): For new and renewal business effective May 1, 2011, adopt NCCI rates announced in Circular IL-2010-05 and approved in IL-2010-10.

\*Adjusted to reflect all prior rate changes.

\*\*Change in Company's premium level which will result from application of new rates.

Amerisure Insurance Company  
Name of Company

Tracy Upcott - Compliance Analyst II  
Official - Title

# FILED

MAY 01 2011

STATE OF ILLINOIS  
DEPARTMENT OF INSURANCE  
SPRINGFIELD, ILLINOIS

# ILLINOIS DEPARTMENT OF INSURANCE

## SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective May 1, 2011

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers Compensation</u> Line of Insurance	6,008,855	-0.8%

Does filing only apply to certain territory (territories) or certain classes? If so, specify: no

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): For new and renewal business effective May 1, 2011, adopt NCCI rates announced in Circular IL-2010-05 and approved in IL-2010-10.

\*Adjusted to reflect all prior rate changes.

\*\*Change in Company's premium level which will result from application of new rates.

Amerisure Insurance Company

Name of Company

Tracy Upcott - Compliance Analyst II

Official - Title

# FILED

MAY 01 2011

STATE OF ILLINOIS  
DEPARTMENT OF INSURANCE  
SPRINGFIELD, ILLINOIS

**FILED**

MAY 01 2011

STATE OF ILLINOIS  
DEPARTMENT OF INSURANCE  
SPRINGFIELD, ILLINOIS

Form (RF-3)

SUMMARY SHEETChange in Company's premium or rate level produced by rate  
revision effective 05/01/11.

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers Compensation</u>	<u>\$1,730,305</u>	<u>3.5%</u>
<u>Line of Insurance</u>		

Does filing only apply to certain territory (territories) or certain classes?  
If so, specify: No.Brief description of filing. (If filing follows rates of an advisory  
organization, specify organization): \_\_\_\_\_Adopting NCCI rates as found in NCCI Circular IL-2010-10.

- \* Adjusted to reflect all prior rate changes.  
\*\* Change in Company's premium level which will  
result from application of new rates.

Citizens Insurance Company of America  
Name of CompanyMandi Al-Beik - Associate State Filings Analyst  
Official - Title

**FILED**

MAY 01 2011

Form (RF-3)

SUMMARY SHEETSTATE OF ILLINOIS  
DEPARTMENT OF INSURANCE  
SPRINGFIELD, ILLINOISChange in Company's premium or rate level produced by  
revision effective 05/01/11

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers Compensation</u>	<u>\$4,941,656</u>	<u>3.6%</u>
<u>Line of Insurance</u>		

Does filing only apply to certain territory (territories) or certain classes?  
If so, specify: No.Brief description of filing. (If filing follows rates of an advisory  
organization, specify organization): \_\_\_\_\_Adopting NCCI rates as found in NCCI Circular IL-2010-10.

\* Adjusted to reflect all prior rate changes.

\*\* Change in Company's premium level which will  
result from application of new rates.Citizens Insurance Company of Illinois  
Name of CompanyMandi Al-Beik - Associate State Filings Analyst  
Official - Title

# FILED

JUN 01 2011

Form (RF-3)

## SUMMARY SHEET

STATE OF ILLINOIS  
DEPARTMENT OF INSURANCE  
SPRINGFIELD, ILLINOIS

Change in Company's premium or rate level produced by rate revision effective: June 1, 2011

(1)	(2)	(3)
Coverage	Annual Premium Volume (Illinois)*	Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Worker's Compensation	46,048,630	1.4%
16. Other		
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: \_\_\_\_\_

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

We are modifying our company specific exception pages.

We are adopting NCCI's 01/01/2011 rates and modifying our company specific rate deviations.

\*Adjusted to reflect all prior rate changes.

\*\*Change in Company's premium level which  
will result from application of new rates.

COUNTRY Mutual Insurance Company

Name of Company

*Richard A. Smith*

Richard A. Smith

Chief Property/Casualty Actuary

Official and Title

**FILED**

**MAY 01 2011**

Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by  
revision effective 05/01/11

STATE OF ILLINOIS  
DEPARTMENT OF INSURANCE  
SPRINGFIELD, ILLINOIS

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers Compensation</u>	<u>\$4,213,904</u>	<u>-5.4%</u>
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes?  
If so, specify: No.

Brief description of filing. (If filing follows rates of an advisory  
organization, specify organization): \_\_\_\_\_

Adopting NCCI rates as found in NCCI Circular IL-2010-10.

- \* Adjusted to reflect all prior rate changes.  
\*\* Change in Company's premium level which will  
result from application of new rates.

The Hanover Insurance Company  
Name of Company

Mandi Al-Beik - Associate State Filings Analyst  
Official - Title

H29219D

INS00106

**FILED**

AUG 01 2011

Form (RF-3)

STATE OF ILLINOIS  
DEPARTMENT OF INSURANCE  
SPRINGFIELD, ILLINOIS

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective August 1, 2011

(1)	(2)	(3)
Coverage	Annual Premium Volume (Illinois)*	Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers Compensation</u>	<u>\$913,508</u>	<u>0.0%</u>
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

NA

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

We are filing to adopt NCCI's January 1, 2011 loss costs adjusted by our revised multiplier of 1.326 for all classes.

This will result in a 0.0% overall change.

\* Adjusted to reflect all prior rate changes.

\*\* Change in Company's premium level which will  
result from application of new rates

**FILED**

AUG 01 2011

STATE OF ILLINOIS  
DEPARTMENT OF INSURANCE  
SPRINGFIELD, ILLINOIS

Iowa American Insurance Company  
Name of Company

Beverly Barber - Compliance  
Official - Title

H29219D

## SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective August 1, 2011

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers Compensation</u>	<u>\$3,523,921</u>	<u>0.0%</u>
<u>Line of Insurance</u>		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

NA

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

We are filing to adopt NCCI's January 1, 2011 loss costs adjusted by our revised multiplier of 1.658 for all classes.This will result in a 0.0% overall change.

\* Adjusted to reflect all prior rate changes.

\*\* Change in Company's premium level which will  
result from application of new rates.**FILED**Iowa Mutual Insurance CompanyName of Company

AUG 01 2011

STATE OF ILLINOIS  
DEPARTMENT OF INSURANCE  
SPRINGFIELD, ILLINOISBeverly Barber - ComplianceOfficial - Title

# ILLINOIS SUMMARY SHEET

## FORM RF-3

Change in Company's premium or rate level produced by rate revision effective

**April 1, 2011**

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Workers Compensation		
16. Other		
Line of Insurance		
	<b>3,984,981</b>	<b>+0.4%</b>

**FILED**

APR 01 2011

STATE OF ILLINOIS  
DEPARTMENT OF INSURANCE  
SPRINGFIELD, ILLINOIS

Does filing only apply to certain territory (territories) or certain classes? If so, specify

**No**

Brief description of filing (if filing follows rates of an advisory organization, specify organization)

**At this time, the Manufacturers Alliance Insurance Company (FEIN #23-2086596) files to adopt the loss costs approved in NCCI's filing #IL-2010-10 for use against our approved 1.920 LCM.**

\* Adjusted to reflect all prior rate changes.

\*\* Change in Company's premium level which will result from application of new rates.

**Manufacturers Alliance Insurance  
Company**

\_\_\_\_\_  
Name of Company

**Linda R. Greer- Associate Product Specialist**

\_\_\_\_\_  
Official — Title

SUMMARY SHEET**FILED**

MAY 01 2011

Change in Company's premium or rate level produced by rate  
revision effective 05/01/11STATE OF ILLINOIS  
DEPARTMENT OF INSURANCE  
SPRINGFIELD, ILLINOIS  
Percent  
Change (+ or -)\*\*

(1) Coverage	(2) Annual Premium Volume (Illinois)*	Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers Compensation</u>	\$7,368,388	0.6%
<u>Line of Insurance</u>		

Does filing only apply to certain territory (territories) or certain classes?  
If so, specify: No.Brief description of filing. (If filing follows rates of an advisory  
organization, specify organization): \_\_\_\_\_Adopting NCCI rates as found in NCCI Circular IL-2010-10.

- \* Adjusted to reflect all prior rate changes.  
 \*\* Change in Company's premium level which will  
 result from application of new rates.

Massachusetts Bay Insurance Company  
 \_\_\_\_\_  
 Name of Company

Mandi Al-Beik - Associate State Filings Analyst  
 \_\_\_\_\_  
 Official - Title

# ILLINOIS DEPARTMENT OF INSURANCE

## SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 1/1/11

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers' Compensation</u> Line of Insurance	\$103,206	+1.5%

Does filing only apply to certain territory (territories) or certain classes? If so, specify: This is a reference filing. We are adopting the changes made by NCCI in Circular IL-2010-10

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are adopting the changes made by NCCI in Circular IL-2010-10. Our only deviation is unchanged from all prior rate filings. Our maximum minimum premium is filed at \$750 as opposed to the NCCI maximum minimum premium of \$1000. Please see the attached manual exception page which indicates the maximum minimum premium is \$750. The manual exception page shows the maximum minimum premium and the premium algorithm we filed for 2010, 2009, 2008, 2007 and 2006.

\*Adjusted to reflect all prior rate changes.

\*\*Change in Company's premium level which will result from application of new rates.

MEMIC Indemnity Company

Name of Company

Compliance Analyst

Official - Title

# FILED

JAN 01 2011

STATE OF ILLINOIS  
DEPARTMENT OF INSURANCE  
SPRINGFIELD, ILLINOIS

## Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

## SUMMARY SHEET

**FILED**

MAY 01 2011

STATE OF ILLINOIS  
DEPARTMENT OF INSURANCE  
SPRINGFIELD, ILLINOISChange in Company's premium or rate level produced by rate revision  
effective May 1, 2011

(1)	(2)	(3)
Coverage	Annual Premium Volume (Illinois) *	Percent Change (+or-) **
1. Automobile Liability Private Passenger		
Commercial		
2. Automobile Physical Damag Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Workers' Compensation	11,876,594	+7%
Life of Insurance		

Does filing only apply to certain territory (territories) or certain Classes? If so, specify:

Revised Deviated Classification Codes (+15%): 8824, 8829, 8842, and 8864.

Brief description of filing. (If filing follows rates of an advisory Organization, specify organization):

NCCI - IL 2010 - 10 Illinois Voluntary Market - Approval of Advisory Rates, Loss Costs, and Rating Values Effective January 1, 2011.

\*Adjusted to reflect all prior rate changes.

\*\*Change in Company's premium level which will result from application of new rates.

**FILED**

MAY 01 2011

STATE OF ILLINOIS  
DEPARTMENT OF INSURANCE  
SPRINGFIELD, ILLINOIS

Midwest Insurance Company

Name of Company

Debi Barr-Holquist, Compliance Manager

Official - Title

## ILLINOIS SUMMARY SHEET

## FORM RF-3

Change in Company's premium or rate level produced by rate revision effective

**April 1, 2011**

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Workers Compensation		
16. Other		
Line of Insurance		
	<b>13,015,626</b>	<b>+0.4%</b>

**FILED**  
**APR 01 2011**  
 STATE OF ILLINOIS  
 DEPARTMENT OF INSURANCE  
 SPRINGFIELD, ILLINOIS

Does filing only apply to certain territory (territories) or certain classes? If so, specify

**No**

Brief description of filing (if filing follows rates of an advisory organization, specify organization)

**At this time, the Pennsylvania Manufacturers' Association Insurance Company (FEIN #23-1642962) files to adopt the loss costs approved in NCCI's filing #IL-2010-10 for use against our approved 1.540 LCM.**

\* Adjusted to reflect all prior rate changes.

\*\* Change in Company's premium level which will result from application of new rates.

**Pennsylvania Manufacturers'  
 Association Insurance Company**

Name of Company

**Linda R. Greer- Associate Product Specialist**

Official — Title

## ILLINOIS SUMMARY SHEET

## FORM RF-3

Change in Company's premium or rate level produced by rate revision effective

**April 1, 2011**

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Purpose		
14. Crop Hail		
15. Workers Compensation		
16. Other		
Line of Insurance		
	<b>1,699,683</b>	<b>+0.4%</b>

**FILED**

APR 01 2011

STATE OF ILLINOIS  
DEPARTMENT OF INSURANCE  
SPRINGFIELD, ILLINOIS

Does filing only apply to certain territory (territories) or certain classes? If so, specify

**No**

Brief description of filing (if filing follows rates of an advisory organization, specify organization)

**At this time, the Pennsylvania Manufacturers Indemnity Company (FEIN #23-2217934) files to adopt the loss costs approved in NCCI's filing #IL-2010-10 for use against our approved 1.250 LCM.**

\* Adjusted to reflect all prior rate changes.

\*\* Change in Company's premium level which will result from application of new rates.

**Pennsylvania Manufacturers Indemnity  
Company**

Name of Company

Linda R. Greer- Associate Product Specialist

Official — Title

**FILED**

Change in Company's premium or rate level produced by rate revision effective 7-1-2011 **JUL 01 2011**

(1)	(2)	STATE OF ILLINOIS DEPARTMENT OF REVENUE SPRINGFIELD, ILLINOIS (3) Percent Change (+ or -)**	
Coverage	Annual Premium Volume (Illinois)*		
1. Automobile Liability Private Passenger Commercial			
2. Automobile Physical Damage Private Passenger Commercial			
3. Liability Other Than Auto			
4. Burglary and Theft			
5. Glass			
6. Fidelity			
7. Surety			
8. Boiler and Machinery			
9. Fire			
10. Extended Coverage			
11. Inland Marine			
12. Homeowners			
13. Commercial Multi-Peril			
14. Crop Hail			
15. Other <u>Workers' Compensation</u> <u>Line of Insurance</u>	3,642,136	4.9%	

Does filing only apply to certain territory (territories) or certain classes?  
If so, specify: \_\_\_\_\_

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): NCCI

Adopt 1-1-2011 Advisory Rates with class deviations and a flat deviation as listed on the attachment.

- \* Adjusted to reflect all prior rate changes.  
\*\* Change in Company's premium level which will result from application of new rates.

Sentry Select Insurance Company

Name of Company

*Mike Williams*

- Vice President

Official - Title

## ILLINOIS DEPARTMENT OF INSURANCE

## SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 05/01/11 +3.0%

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers compensation</u> Line of Insurance	50,354,631	+3.0%

Does filing only apply to certain territory (territories) or certain classes? If so, specify: This filing applies to all classes,  
although the resulting impact is not uniform by class.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Adopt NCCI loss costs  
referenced in approval circular IL-2010-10; adjust LCM to match LCM implied by NCCI rates referenced in approval  
circular IL-2010-10.

\*Adjusted to reflect all prior rate changes.

\*\*Change in Company's premium level which will result from application of new rates.

United Wisconsin Insurance Company  
Name of Company

Judy Thomas, Compliance Advisor  
Official - Title

**FILED**

**MAY 01 2011**

**STATE OF ILLINOIS  
DEPARTMENT OF INSURANCE  
SPRINGFIELD, ILLINOIS**

## SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective September 1, 2011

(1)	(2)	(3)
Coverage	Annual Premium Volume (Illinois)*	Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers' Compensation</u>	<u>17,621,461</u>	<u>+6.2</u>
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:  
deviations to specific class codes - see attached

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Overall premium level change of + 6.2. Filing a deviation of 1.280 from the NCCI rates for Westfield Insurance  
#228-24112. Filing deviations to specific class codes for ; Tier II - 1.00, Tier III .90 (-10%), Tier IV .80 (-20%) stay  
the same. The deviation for all other class codes changes to 1.280 (+28).

\* Adjusted to reflect all prior rate changes.

\*\* Change in Company's premium level which will  
 result from application of new rates.

**FILED**  
 SEP 01 2011  
 STATE OF ILLINOIS  
 DEPARTMENT OF INSURANCE  
 SPRINGFIELD, ILLINOIS

Westfield Insurance Co.  
 Name of Company

Rhonda Roberts, CIC  
Line of Business Specialist  
Commercial Underwriting Office  
 Official - Title

# FILED

SEP 01 2011

Form (RF-3)

## SUMMARY SHEET

STATE OF ILLINOIS  
DEPARTMENT OF INSURANCE  
SPRINGFIELD, ILLINOIS

Change in Company's premium or rate level produced by rate revision effective September 1, 2011

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers' Compensation</u>	<u>1,422,447</u>	<u>-2.9</u>
<u>Line of Insurance</u>		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

N/A

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Overall premium level change of -2.9. Filing a deviation of 1.088 from the NCCI rates for Westfield National Insurance

#228-12120. Also filing deviations to specific class codes; Tier II - .85, Tier III .765, Tier IV .680, all other class codes 1.088 .

\* Adjusted to reflect all prior rate changes.

\*\* Change in Company's premium level which will result from application of new rates.

Westfield National Insurance Co.  
Name of Company

Rhonda Roberts, CIC  
Line of Business Specialist  
Commercial Underwriting Office  
Official - Title